2011 Military Health System Conference

Palm Trees in the Storm

Partners in Resiliency: Leadership Success with OSCAR

The Quadruple Aim: Working Together, Achieving Success
LtCol Michael V. Samarov, USMC and Lt Col Paul H. Nelson, USAF, MC, SFS
24 January 2011







Instructor Battalion, The Basic School and 81st Medical Group

Big Picture



- Big Picture
- OSCAR as a Leadership Tool
- Case Study CASF at Camp Leatherneck
- Teamwork: Command & Medical
- What this means to you

One Marine's View of ____Command



- Command is about
 - Mission and Vision
 - Environment
 - Accountability
- Commanders must practice
 - Trust
 - Nerve
 - Restraint
- OSCAR a leadership tool to build resilience

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The Quadruple Aim





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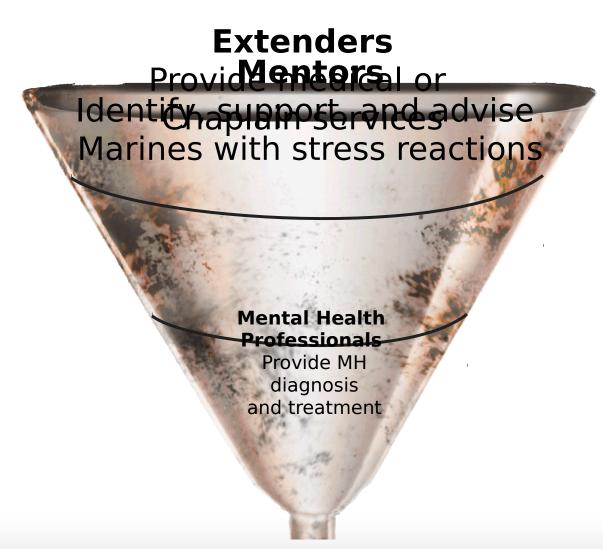
OSCAR: A Tool for Leaders





Goal: Unit Combat Readiness (





The Stress Continuum



| READY | REACTING | INJURED | ILL |
|---|--|--|--|
| Good to go Well trained Prepared Fit and tough Cohesive units, ready families | Distress or impairment Mild, transient Anxious or irritable Behavior change | More severe or persistent distress or impairment Leaves lasting evidence (personality change) | Stress injuries that don't heal without intervention Diagnosable PTSD Depression Anxiety Addictive |
| Unit Leader Individual | | | Chaplain & Medical |

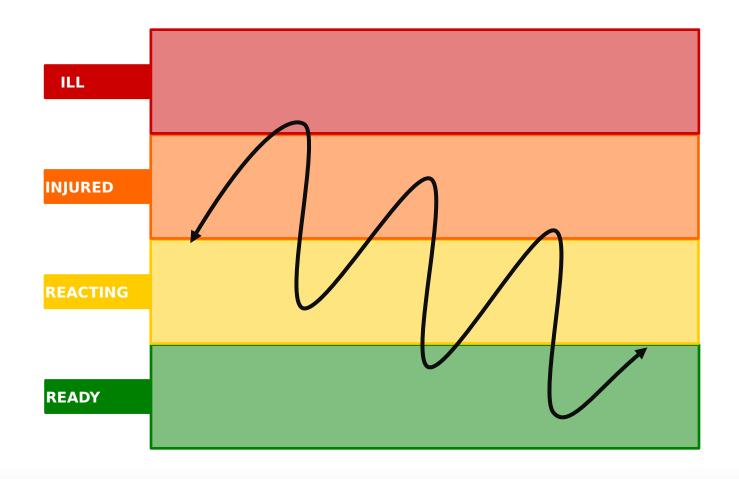
Responsibility

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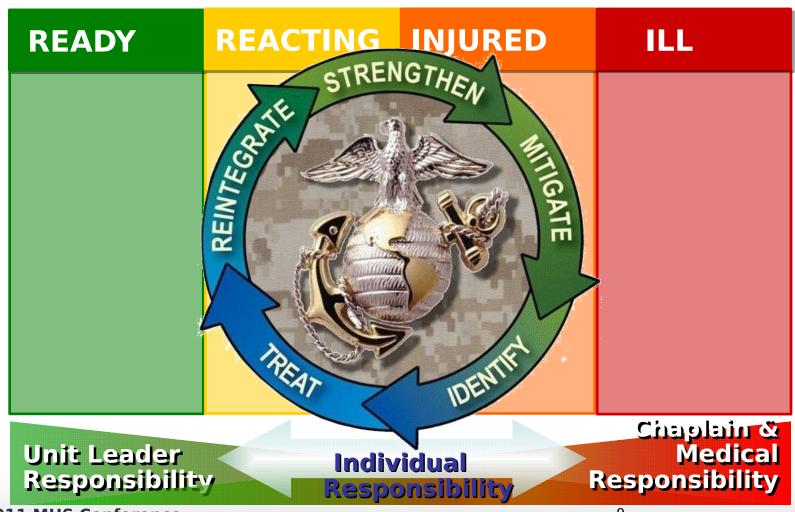
Building Resiliency





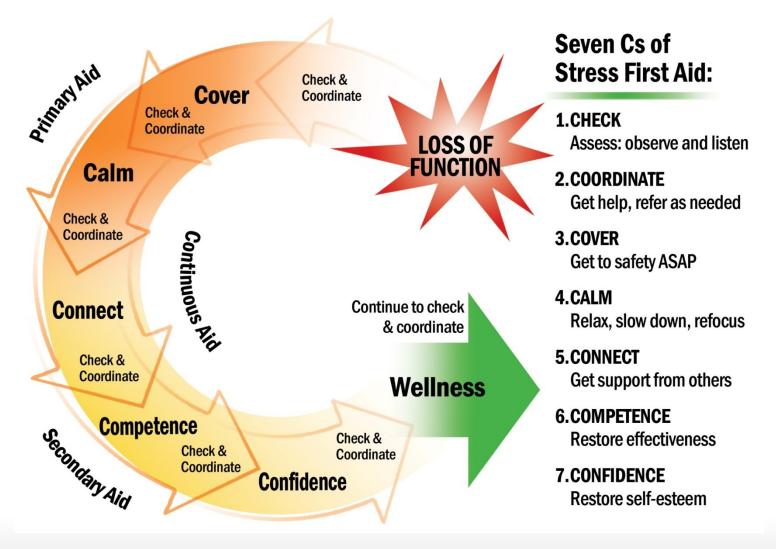
Core Leader Functions





Combat Operational Stress First Aid (COSFA)

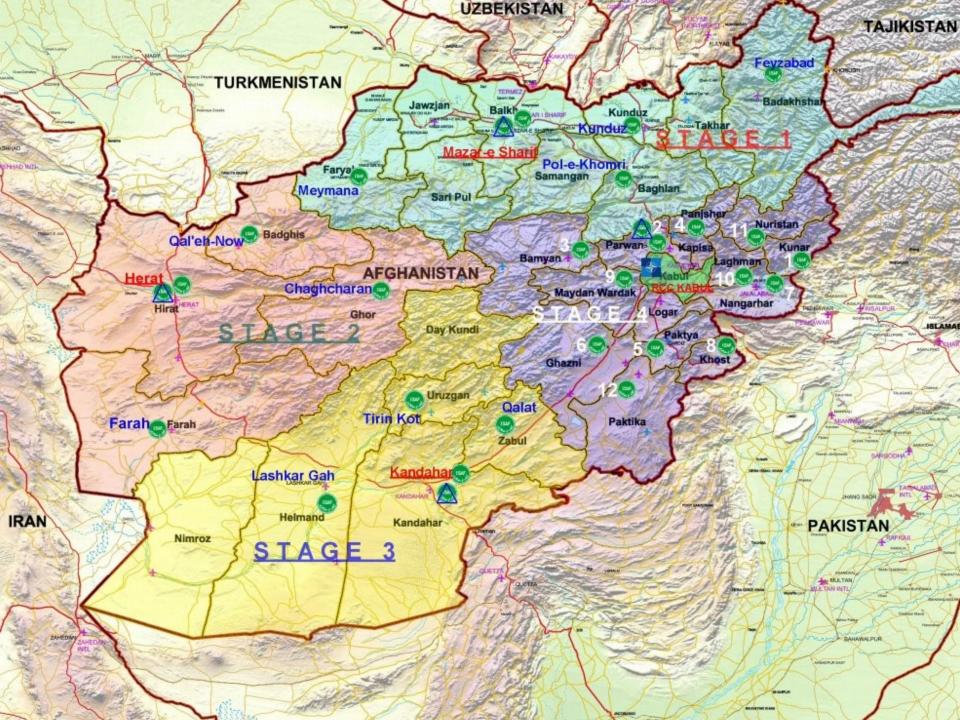




Case Study: 451 CASF, Bastion

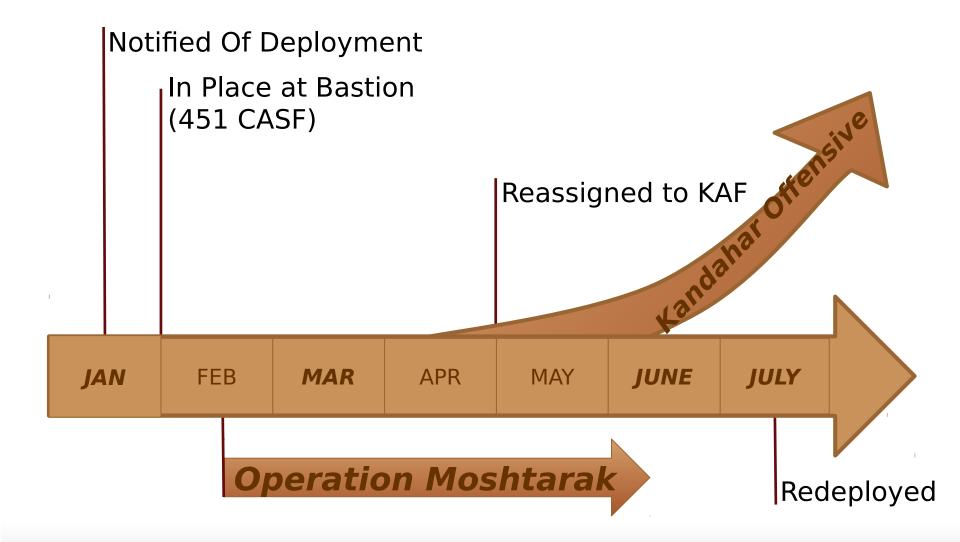






One USAF Flight Doc's _____Timeline:





Situation at Bastion (1 Feb 2010)



- British base co-located w/Leatherneck (USMC)
- RC (S) transitioning to RC (SW)
- 1 MEB transitioning to I MEF
- British trauma hospital (w/USN, USA assets)
- USAF AE detachment (AE and CASF)
 - Chain of Command thru 451 AEW (KAF)
- Preparing for Op MOSTARAK (Marjah)
- Diverse casualty predictions

451 EAES/CC's Mission Statement



- Decompress trauma hospital for Marjah
- Execute Aeromedical Evacuation
- "Make History"

451 EAES/CC's Mission Statement



- Decompress trauma hospital for Marjah
- Execute Aeromedical Evacuation
- "Make History"
- Care for wounded warriors
- Support Operational/Tactical Commanders
- Work with Joint and Coalition partners

Commander's Intent



"...the key thing that AFCENT provides is precision airpower... Our (Airmen) are focused on putting key capabilities where they're needed by the customer. The customer is the commanding general of the ground forces, and our job is to make sure the airpower that we give him is as good and effective as it could possibly be."

Lt Gen Mike Hostage AFCENT/CC 8/28/09

451 CASF Capabilities



- 4 tents, 25 beds (manned for 12 bed ops)
- Cadillac toilet, shower facilities
- Resiliency tent (evolution)
- Chow from British chow hall
- 26 Total Force medical Airmen
 - 2 Flight Surgeons
 - -6 Nurses
 - 10 med techs
- Command, control, communication,

CARE

Current Route From Injury to Definitive





First Responder Care



1 Hour



Forward Resuscitative Care



TACTICAL MEDEVAC/AE





Theater Hospital Care



TACTICAL/STRATEGIC AE





Deπnitive Care

Risk: One Way Casualty Flow





First Responder Care





Forward Resuscitative Care



TACTICAL MEDEVAC/AE





TACTICAL/STRATEGIC AE

24-72 Hours



Theater Hospital Care



Care

Resiliency and Reintegration (





First Responder Care





Forward Resuscitative Care



TACTICAL MEDEVAC/AE





TACTICAL/STRATEGIC AE

24-72 Hours

Theater Hospital Care



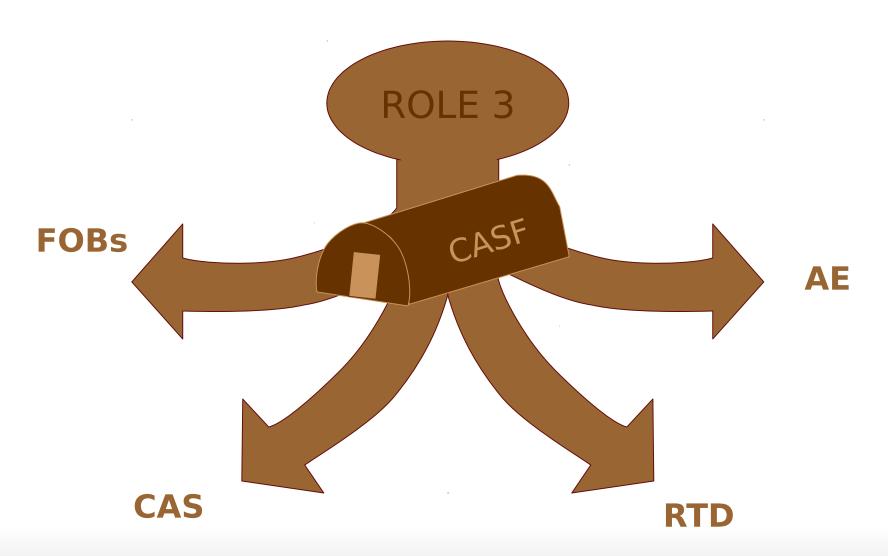
Care

Reintegration to Mission

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451 CASF: Patient Care Facilitator





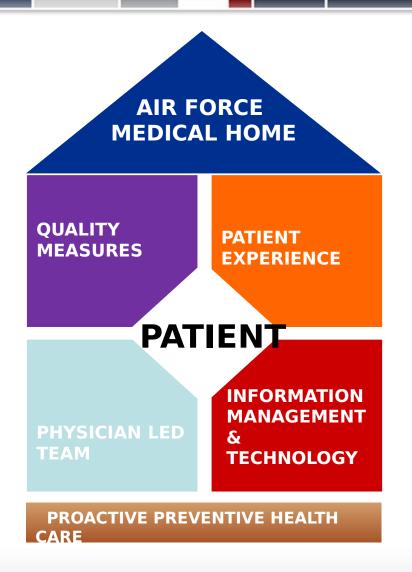
Keys to Combat Casualty Care



- Physician led
- Best evidence based standard of care
- Emphasis on basic patient handoff
 - Physician to Physician
 - Nursing to Nursing
- Continuity of care (documentation and EMR)
- Patient focused
- Mission focused

Air Force Medical Home





- Outpatient based
- Civilian experience
- Peacetime benefit
- Patient focused*









Sat Wilson 3/6 LIMA (4th CAG whenks for Everything you rock more than Mother Care





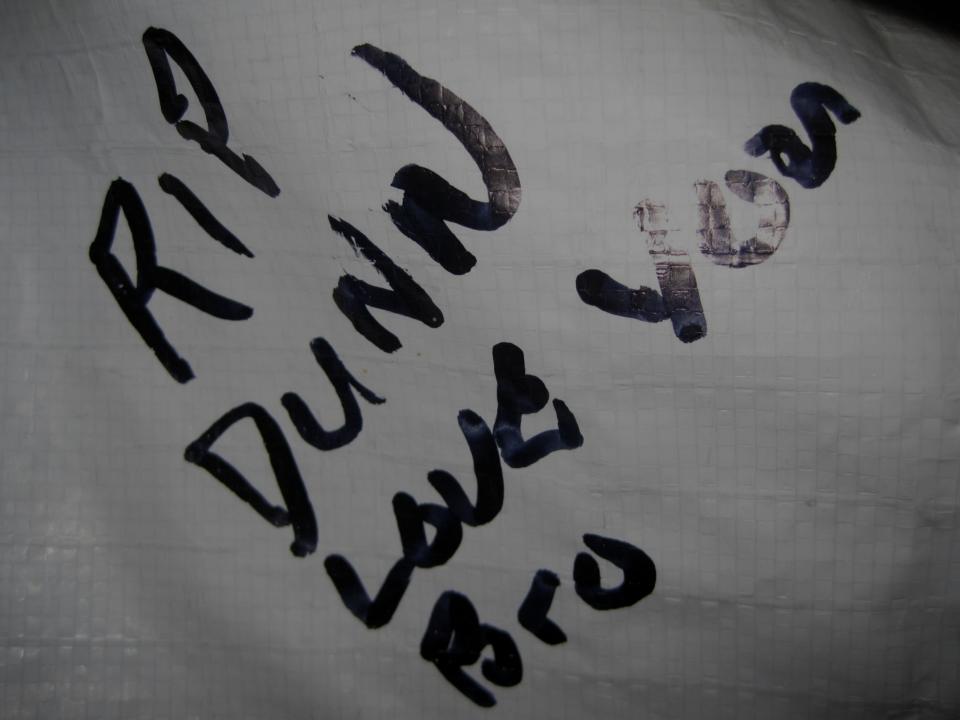
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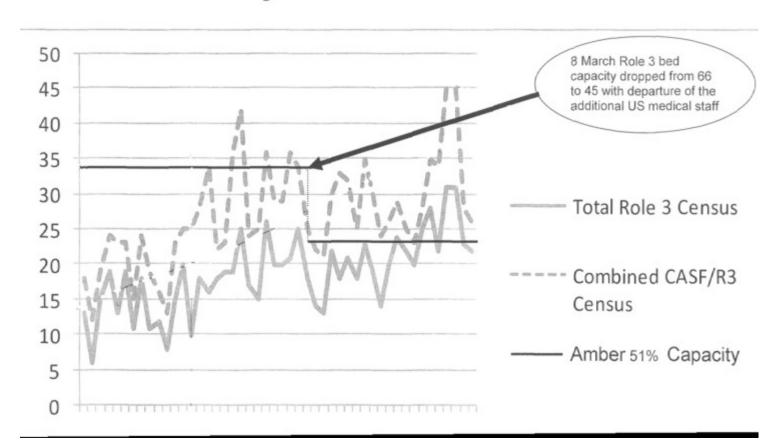




US Holding Bed Capability: I MEF Force Multiplier



Census Comparison 1 Feb 2010 thru 21 March 2010



I MEF CG Message

"We have a unique opportunity to establish a Joint Specialty Care Center to support state of the art rehabilitation for our wounded warriors, while facilitating evacuation for those Marines who are unable to return to duty IAW the theater evacuation policy. This joint synergy will provide more efficient use of both manpower and facilities, and most importantly continue to elevate the standard of medical care for our wounded Marines."

Observations and Paradoxes



- AE unit cuts AE demand
- Benefits of "Slow" transport
- Benefits of low tech care
- Synergy of efficient, lower cost care

Relevance of the Quadruple Aim

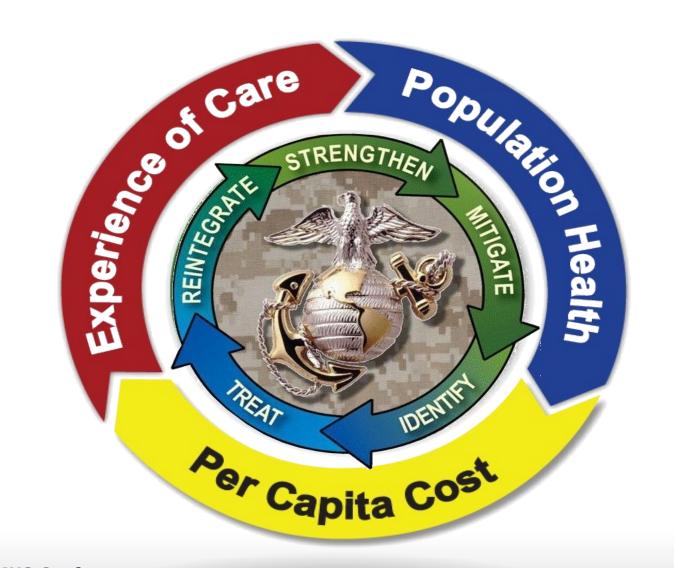




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Relevance of the Quadruple Aim





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Partners and Trust





Key Take Aways



- Stress continuum
- Line/Medical Synergy
- Embedded resiliency
- Combat casualty flow
- Benefits of low tech, low cost, slower care
- Theater evacuation policy, holding capability, and reintegration
- Post Deployment Care as Reintegration
- Partners and Trust

Questions?





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